FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

11	OMB APPROVAL
V	OMB Number: 3235-0076
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SEC USE ONLY

DATE RECEIVED

Serial

Prefix

103°° 00		
Pictet: Non-US Equity LLC: Limited Liabilit		□ Section 4(6) □ ULOE
Filing Under (Check box(es) that apply):		= Section 4(0) = OLOL
Type of Filing: ☐ New Filing ☑ Amend	A. BASIC IDENTIFICATION DATA	4
Enter the information requested about the issue.		<u> </u>
 	nent and name has changed, and indicate change.)	
Pictet: Non-US Equity LLC		
	umber and Street, City, State Zip Code) 10004	Telephone Number (including Area Code) (212) 902-1000
	(Number and Street, City, State and Zip Code)	Telephon
Brief Description of Business To operate as a private investment fund.		08061068
Type of Business Organization ☐ corporation ☐ business trust	☐ limited partnership, already formed☐ limited partnership, to be formed☐	✓ other (please specify): Limited Liability Company
Actual or Estimated Date of Incorporation or Or		Actual Estingated 2 2 2008
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal Service abbrevia State: CN for Canada; FN for other foreign jui	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA 建二磷酸二二 山 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. General and/or ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☑ Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Goldman Sachs Asset Management, L.P. (the Issuer's Managing Member) Business or Residence Address (Number and Street, City, State, Zip Code) One New York Plaza, New York, New York 10004 Executive Officer* Director \Box General and/or Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner * of the Issuer's Managing Member Managing Partner Full Name (Last name first, if individual) Asali, Omar M. (Number and Street, City, State, Zip Code) Business or Residence Address One New York Plaza, New York, New York 10004 Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner Executive Officer* Director General and/or * of the Issuer's Managing Member Managing Partner Full Name (Last name first, if individual) Barbetta, Jennifer Business or Residence Address (Number and Street, City, State, Zip Code) One New York Plaza, New York, New York 10004 ☐ Beneficial Owner Executive Officer* Director General and/or Check Box(es) that Apply: □ Promoter ablaManaging Partner * of the Issuer's Managing Member Full Name (Last name first, if individual) Gottlieb, Jason Business or Residence Address (Number and Street, City, State, Zip Code) One New York Plaza, New York, New York 10004 ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☐ Director General and/or Check Box(es) that Apply: * of the Issuer's Managing Member Managing Partner Full Name (Last name first, if individual) Ort, Peter Business or Residence Address (Number and Street, City, State, Zip Code) One New York Plaza, New York, New York 10004 Check Box(es) that Apply: Beneficial Owner Executive Officer* Director General and/or ☐ Promoter * of the Issuer's Managing Member Managing Partner Full Name (Last name first, if individual) Ross, Hugh M. Business or Residence Address (Number and Street, City, State, Zip Code) One New York Plaza, New York, New York 10004 ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Check Box(es) that Apply: Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

				B. IN	FORMAT	ION ABO	UT OFFI	ERING				. •
		4	····								Yes	No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									Q			
			A	ınswer also	in Appendi	ix, Column	2, if filing u	ınder ULOI	Ξ.			
2. What i	s the minim	um investm	ent that wil	l be accepte	ed from any	individual?					\$	*
What is the minimum investment that will be accepted from any individual?*The Issuer's Manager may in its sole discretion accept subscription amounts in whatever amount it determines is								Yes	No			
acceptable	e. he offering j	nermit inint	ownership	of a single	unit?						Ø	
		-										
commi	the informa	nilar remun	eration for s	olicitation -	of purchase	rs in connec	tion with s	ales of secu	rities in the	offering.		
commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such									th a state			
or state a broke	es, ust the n er or dealer,	you may se	broker or act at forth the i	nformation	for that bro	ker or deale	r only.	u are associ	ated person	3 01 30011		
	(Last name			-	.						-	
Coldman	Sachs & C	o.*										
·	Sachs & C											
	the securi		sold throug	gh Goldma	n, Sachs &	Co., no coi	nmissions v	will be paid	l, directly o	r indirectly	, for solicit	ing any
Business of	in any juri or Residence	Address (1	Number and	Street, City	y, State, Zip	Code)				· · -		
05 Dunad	Street, New	Vork No	w Vork 10	004			-					
	Associated B								- -	· <u>···</u>		
States in V	Vhich Perso	n Listed Us	a Colinited	or Intends t	o Solicit Pu	rchacers				· · · · · · · · · · · · · · · · · · ·		
	All States" of									•••••	🗹 A	ll States
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[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC] (Last name	[SD]	[TN]	[XT]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
run Name	(Last name	inst, n mo	ividual)									
Business o	or Residence	Address ()	Number and	Street, City	v. State. Zin	Code)					-	
Dasmess	,, 1(0),00,100	(.	, , , , , , , , , , , , , , , , , , , ,	J. 100., 01.	,,, _F	,						
Name of A	Associated B	roker or De	ealer									
			a 11 1 1		a ii i n	1						
	Vhich Perso All States" o										🗆 Al	l States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
(IL)	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	(WI)	[WY]	[PR]
Full Name	(Last name	tirst, it ind	ividual)									
Duringen	or Residence	A ddwona ()	Number and	Street Cit	. State 7in	Code		· -				
Business C	or Residence) seerbank	Number and	Sileet, Cit	y, State, Zip	Code						
Name of A	Associated B	troker or De	ealer							-		·-·
rame of r	associated L	TORGE OF DE										
States in V	Which Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers				_		
	All States"										🗆	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
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(MT)	[NE]	[NV]	[NH]	[NJ]	[NM]	[YY]	[NC]	[ND]	(OH)	(OK)	[OR] [WY]	[PA] [PR]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\$\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security		Aggregate Offering Price			Amount Already Sold
	Debt	s	0	;	\$	0
	Equity		0	-	s –	0
	□ Common □ Preferred	Ψ-			-	
	Convertible Securities (including warrants)	c	0	,	\$	0
	· · · · · · · · · · · · · · · · · · ·			•	۳ – \$	0
	Partnership Interests			•	_	
	Other (Specify): Limited Liability Company Units				\$ <u>_</u>	
	Answer also in Appendix, Column 3, if filing under ULOE.	\$_	306,158,427	. :	\$_	306,158,427
	•					
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."					
			Number Investors			Aggregate Dollar Amount of Purchases
	Accredited Investors		314	5	\$	306,158,427
	Non-accredited Investors	_	0	:	\$	0
	Total (for filings under Rule 504 only)	_	N/A		s –	N/A
	Answer also in Appendix, Column 4, if filing under ULOE.	_		•	_	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		Type of			Dollar Amount
	Type of offering		Security			Sold
	Rule 505	_	N/A		\$_	N/A
	Regulation A	_	N/A		\$_	N/A
	Rule 504	_	N/A	. 5	\$ <u>_</u>	N/A
	Total	_	N/A	. 9	\$_	N/A
th th	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees			5	S _	0
	Printing and Engraving Costs		0	5	\$ _	0
	Legal Fees		Ø	5	\$	103,736
	Accounting Fees			5	\$ _	0
	Engineering Fees		_	5	s –	0
	Sales Commissions (specify finders' fees separately)			5	, }	0
	Other Expenses (identify)		_	9	- S	0
	m. t			,	_	102 726

C. OFFERING PRICE; NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

٠.	C. OFFERING PRICE, NUMB	ER OF INVESTORS, EXP	ENS	ES A	ND USE OF P	ROCE	EDS	, , , ,		
_	 b. Enter the difference between the aggregate offering price given in response to Part C Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer." 							306,054,691		
5.	Indicate below the amount of the adjusted gross proto be used for each of the purposes shown. If the afternish an estimate and check the box to the lepayments listed must equal the adjusted gross procoto Part C - Question 4.b. above.									
	Payments to Officers, Directors, & Affiliates							Payments To Others		
	Salaries and Fees			\$_	0	_ 🗆	\$_	0		
	Purchase of real estate			\$_	0		\$_	0		
	Purchase, rental or leasing and installation of machinery and equipment			\$_	0		\$_	0		
	Construction or leasing of plant buildings and facili			\$_	0	_ 🗆	\$_	0		
	Acquisition of other businesses (including the valuation of other businesses).	lue of securities involved in the assets or securities of		\$	0		\$	0		
	Repayment of indebtedness		_	_	0		\$	0		
	Working capital				0		\$ - \$	0		
	Other (Specify): Limited Liability Company Units				0	- <u>1</u>	\$ - \$	306,054,691		
						- ₩ Ø	\$ - \$			
	Column Totals				<u> </u>	- <u>F</u>	» _	300,034,091		
	Total Payments Listed (column totals added)									
	***	D. FEDERAL SIGNATUR	RE				-			
fo	he issuer has duly caused this notice to be signed llowing signature constitutes an undertaking by the its staff, the information furnished by the issuer to a	issuer to furnish to the U.S. Se	ecuriti	ies an	d Exchange Comr	mission,	upon	er Rule 505, the		
	er (Print or Type) et: Non-US Equity LLC	Signature Carolini Krai	<u>ラ</u>	>	Date September/5, 20	008				
	Name of Signer (Print or Type) Title of Signer (Print or Type) Assistant Secretary of the Issuer's Managing Member									

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).